ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|------------------|--------|-----------|
| | Transferance Pri | | |
| FEE DETERMINATION | BA | | 04, 23-01 |
| O.I.P.E. CLASSIFIER | 1000 | 32 | 5/18 |
| FORMALITY REVIEW - | Ew/ | (099 | 06/19/01 |
| RESPONSE FORMALITY REVIEW | HA. | 858 | 8/17/01 |

INDEX OF CLAIMS

| V | Rejected | N | Non-elected |
|---|----------------------------|---|--------------|
| = | Allowed | 1 | Interference |
| _ | (Through numeral) Canceled | Α | Appeal |
| ÷ | Restricted | 0 | Objected |

| Claim | |
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If more than 150 claims or 10 actions staple additional sheet here

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